

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Working for Maryland

ADDRESS (number and street) ▼

PO Box 17241

☐ Check if different than previously reported. (ACC)

Arlington

VA

22216

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00614610

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☒ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

04

01

2016

06

30

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kate Lind

Signature of Treasurer

Kate Lind

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

07

07

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Working for Maryland

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2016

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2016</div></div>		<div><div></div><div>0.00</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>0.00</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>30000.00</div></div>	<div><div></div><div>30000.00</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>30000.00</div></div>	<div><div></div><div>30000.00</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>27837.65</div></div>	<div><div></div><div>27837.65</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div><div></div><div>2162.35</div></div>	<div><div></div><div>2162.35</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Working for Maryland

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04		01		2016

To:

M M	/	D D	/	Y Y Y Y
06		30		2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other  
Than Political Committees

(i) Itemized (use Schedule A).....

30000.00

30000.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

30000.00

30000.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

30000.00

30000.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

30000.00

30000.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

30000.00

30000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	12837.65	12837.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	12837.65	12837.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	15000.00	15000.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	27837.65	27837.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27837.65	27837.65

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	30000.00	30000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30000.00	30000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	12837.65	12837.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	12837.65	12837.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 9  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Working for Maryland**

Full Name (Last, First, Middle Initial) <b>A. David B Baker</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>04 / 21 / 2016</div> </div>	
Mailing Address Turl Street			<b>Transaction ID : SA11AI.4113</b>	
City Oxford	State ZZ	Zip Code	Amount of Each Receipt this Period <div> <div>15000.00</div> </div>	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution		
Name of Employer Lincoln College		Occupation MBA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>15000.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>B. Thomas R. Pavlick</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>04 / 21 / 2016</div> </div>	
Mailing Address 811 4th Street NW #208			<b>Transaction ID : SA11AI.4115</b>	
City Washington	State DC	Zip Code 20001	Amount of Each Receipt this Period <div> <div>15000.00</div> </div>	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution		
Name of Employer CBS Radio		Occupation Programming		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>15000.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address				
City	State	Zip Code	Amount of Each Receipt this Period <div> <div></div> </div>	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30000.00

30000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 9

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Working for Maryland

Full Name (Last, First, Middle Initial)

**A. Ashby Law PLLC**

Mailing Address 717 Princess Street

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SB21B.4126

Amount of Each Disbursement this Period

1202.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Aspect Consulting LLC**

Mailing Address 8401 Excelsior Drive #103

City Madison      State WI      Zip Code 53717

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SB21B.4124

Amount of Each Disbursement this Period

825.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Vertical Strategies**Mailing Address 190 Monroe Avenue NW  
Suite 500

City Grand Rapids      State MI      Zip Code 49503

Purpose of Disbursement  
Online Services: See Sched E Memo Entries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016  
☒ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : SB21B.4119

Amount of Each Disbursement this Period

9999.87

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12837.65

12837.65

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 8 OF 9  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Working for Maryland</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00614610	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>			
Full Name of Payee <b>Conservative Intel</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 190 Monroe Ave NW #500		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">04</span> / <span style="border:1px solid black; padding:2px;">23</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Grand Rapids	State MI	Zip Code 49503	Amount <span style="border:1px solid black; padding:2px;">500.00</span>
Purpose of Expenditure Vertical Strategies: Online Ads		Category/ Type <span style="border:1px solid black; padding:2px;">004</span>	Transaction ID : <b>SE.4133</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">04</span> / <span style="border:1px solid black; padding:2px;">23</span> / <span style="border:1px solid black; padding:2px;">2016</span>
Name of Federal Candidate CHRYSOVALANTIS P KEFALAS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MD</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">0.00</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>Google Inc.</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1500 Amphitheatre Pkwy		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">04</span> / <span style="border:1px solid black; padding:2px;">23</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Mountain View	State CA	Zip Code 94043	Amount <span style="border:1px solid black; padding:2px;">2500.00</span>
Purpose of Expenditure Vertical Strategies: Online Ads		Category/ Type <span style="border:1px solid black; padding:2px;">004</span>	Transaction ID : <b>SE.4122</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">05</span> / <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">2016</span>
Name of Federal Candidate CHRYSOVALANTIS P KEFALAS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MD</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">15000.00</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		<span style="border:1px solid black; padding:2px;">0.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶		<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures.....▶		<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Kate Lind</i>		Date <span style="border:1px solid black; padding:2px;">07</span> / <span style="border:1px solid black; padding:2px;">07</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
		[Electronically Filed]	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 9 OF 9  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Working for Maryland</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00614610		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span>					
Full Name of Payee <b>Victory Phones</b>			<input type="checkbox"/> Memo Item		
Mailing Address 190 Monroe Ave NW # 500			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">04</span> / <span style="border:1px solid black; padding:2px;">23</span> / <span style="border:1px solid black; padding:2px;">2016</span>		
City Grand Rapids		State MI	Zip Code 49503	Amount <span style="border:1px solid black; padding:2px;">15000.00</span>	
Purpose of Expenditure Voter Calls		Category/Type <span style="border:1px solid black; padding:2px;">004</span>		Transaction ID : <b>SE.4099</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">05</span> / <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
Name of Federal Candidate CHRYSOVALANTIS P KEFALAS			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate			District: <u>00</u> State: <u>MD</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">15000.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			<input type="checkbox"/> Memo Item		
Mailing Address			Date of Public Distribution/Dissemination		
City		State	Zip Code	Amount	
Purpose of Expenditure		Category/Type		Date of Disbursement or Obligation	
Name of Federal Candidate			<input type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate			District: _____ State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶ <span style="border:1px solid black; padding:2px;">15000.00</span>					
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ <span style="border:1px solid black; padding:2px;"></span>					
(c) <b>TOTAL</b> Independent Expenditures..... ▶ <span style="border:1px solid black; padding:2px;">15000.00</span>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Kate Lind</i>			Date <span style="border:1px solid black; padding:2px;">07</span> / <span style="border:1px solid black; padding:2px;">07</span> / <span style="border:1px solid black; padding:2px;">2016</span>		
			[Electronically Filed]		